

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To: Division of Corporations
Fax Number : (850) 617-6381

From: Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
Phone : (850) 205-8842
Fax Number : (850) 878-5368

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: _____

FLORIDA PROFIT/NON PROFIT CORPORATION
KOPECKY MANAGEMENT, INC.

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$70.00

Electronic Filing Menu

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ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S., (Profit)

ARTICLE I NAME

The name of the corporation shall be: KOPECKY MANAGEMENT, INC.

ARTICLE II PRINCIPAL OFFICE

Principal street address

720 Bayou Drive

Destin, Florida 32541

Mailing address, if different is:

720 Bayou Drive

Destin, Florida 32541

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: to provide management and consulting services

ARTICLE IV SHARES

The number of shares of stock is: 1,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Christopher M. Kopecky, President

Name and Title:

Address and Director

Address:

720 Bayou Drive

Destin, FL 32541

Name and Title:

Name and Title:

Address

Address:

Name and Title:

Name and Title:

Address

Address:

Name and Title: _____ Name and Title: _____
Address _____ Address: _____

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: Christopher M. Kopecky
Address: 720 Bayou Drive
Destin, Florida 32541

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Bryan W. Duke
Address: 400 West Capitol Ave, Suite 2000
Little Rock, AR 72201

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: _____ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior or 90 business days after the filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

By: Christopher M. Kopecky
Required Signature/Registered Agent

10/11/16
Date

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Bryan W. Duke
Required Signature/Incorporator

10/11/16
Date